



031104

13281 U.S. PTO

Atty. Dkt. No. 086142-0655

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Shinji HAYASHI  
Title: AIRBAG MODULE AND  
MODULE COVER  
Appl. No.: Unknown  
Filing Date: Herewith  
Examiner: Unknown  
Art Unit: Unknown

17548 U.S. PTO  
10/796994

031104

**UTILITY PATENT APPLICATION**  
**TRANSMITTAL**

Mail Stop PATENT APPLICATION  
Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Shinji HAYASHI

Enclosed are:

- [ X ] Application Data Sheet (37 CFR 1.76) (2 pages).
- [ X ] Specification, Claim(s), and Abstract (18 pages).
- [ X ] Formal drawings (5 sheets, Figures 1-8).
- [ X ] Declaration and Power of Attorney (3 pages).

- ☒ Assignment Recordation Cover Sheet (1 page).
- ☒ Assignment of the invention to TAKATA CORPORATION (2 pages).
- ☒ Claim for Convention Priority and 1 Priority Document.
- ☒ Information Disclosure Statement (3 pages).
- ☒ Form PTO/SB/08 listing 8 references, submitting 5 references.

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee	Extra Claims		Rate		Fee Totals
Basic Fee						\$770.00	=	\$770.00
Total	20	-	20	= 0	x	\$18.00	=	\$0.00
Claims:								
Independents	3	-	3	= 0	x	\$86.00	=	\$0.00
:								
If any Multiple Dependent Claim(s) present:					+	\$290.00	=	\$0.00
						SUBTOTAL:	=	\$770.00
<input type="checkbox"/>						Small Entity Fees Apply (subtract ½ of above):	=	\$0.00
						TOTAL FILING FEE:	=	\$770.00
Assignment Recordation Fee:					+	\$40.00	=	\$40.00
TOTAL FEE							=	\$810.00

- ☒ A check in the amount of \$810.00 to cover the filing fee and fee for recordation of Assignment is enclosed.
- ☐ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date: March 11, 2004

By Michael D. Kaminski

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